Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Mary First name Beth Middle name Convery Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4394	

Debtor 1 Mary Beth Convery

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
Include trade names and doing business as names	Business name(s)	Business name(s)		
	EINs	EINs		
5. Where you live	11387 Fisher Ave	If Debtor 2 lives at a different address:		
	Warren, MI 48089 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	Macomb			
	County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6. Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Mary Beth Convery				Case number (if known)				
Par	t 2: Tell the Court About	our Bankı	ruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are choosing to file under				each, see <i>Notice Required by</i> ge 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy te box.	′	
	choosing to the under	■ Chapt	er 7					
		☐ Chapt	er 11					
		☐ Chapt	er 12					
		☐ Chapt	er 13					
8.	How you will pay the fee	abo ord	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more dabout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or norder. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check a pre-printed address.					
				y the fee in installr ee in Installments (C		on, sign and attach the Application for Individuals to Pa	y	
			•	,	,	n only if you are filing for Chapter 7. By law, a judge m	av.	
but is not required to, waive your fee, and may do so only if your income is applies to your family size and you are unable to pay the fee in installments the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103)				our income is less than 150% of the official poverty line in installments). If you choose this option, you must fill o	that			
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
44	Da		0-4-	line 40				
11.	Do you rent your residence?	No.		line 12.				
		☐ Yes.	Has yo		d an eviction judgment agains	st you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial</i> this bankruptcy pe		Judgment Against You (Form 101A) and file it as part of	of	

page 3

	tor 1 Mary Beth Conver	,		Case number (if known)
ar	Report About Any Bu	sinesses	You Own as a Sole P	Proprietor
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location	n of business
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business.	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, C	ity, State & ZIP Code
	it to this petition.		Check the appropri	riate box to describe your business:
			☐ Health Car	e Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single Ass	et Real Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroke	er (as defined in 11 U.S.C. § 101(53A))
			☐ Commodity	y Broker (as defined in 11 U.S.C. § 101(6))
			☐ None of the last of the	e above
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that y	11, the court must know whether you are a small business debtor so that it can set appropriate ou are a small business debtor, you must attach your most recent balance sheet, statement of t, and federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing unde	er Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under C Code.	hapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under C	hapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
ar	t 4: Report if You Own or	Have Any	Hazardous Property	or Any Property That Needs Immediate Attention
	Do you own or have any	■ No.	- Hazarada Freperty	or range reports and records immediate random
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	□ Yes.	What is the hazard?	
	Or do you own any property that needs immediate attention?		If immediate attention needed, why is it needed.	• •
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property	y?
	- •			Number, Street, City, State & Zip Code

Debtor 1 Mary Beth Convery

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Mary Beth Convery Case number (if known)				nber (if known)			
Part	6: Answer These Questi	ons for Re	porting Purposes				
16.	What kind of debts do you have?			consumer debts? Consumer debts are drawn as a consumer debts.	efined in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consumer debts or busin	ness debts		
		-					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any exempt pr vailable to distribute to unsecured credito	operty is excluded and administrative expenses rs?		
	administrative expenses		■ No				
	are paid that funds will be available for		☐ Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	■ 1-49		☐ 1,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	□ 50,001-100,000		
		☐ 100-19		□ 10,001-25,000	☐ More than100,000		
		200-99	9				
19.	How much do you estimate your assets to	\$0 - \$5	0,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	• • • • •		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
_0.	estimate your liabilities	■ \$0 - \$5	0,000 01 - \$100,000	□ \$1,000,001 - \$10 million	□ \$1,000,000,001 - \$10 billion		
	to be?		01 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion		
		□ \$500,0	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Part	:7: Sign Below						
For	you	I have exa	mined this petition, and I de	eclare under penalty of perjury that the info	ormation provided is true and correct.		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
				not pay or agree to pay someone who is he notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this		
		I request r	elief in accordance with the	chapter of title 11, United States Code, s	pecified in this petition.		
			y case can result in fines up		y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Mary Be	Beth Convery th Convery of Debtor 1	Signature of Deb	otor 2		
		Executed	on May 20, 2019	Executed on			
			MM / DD / YYYY		/IM / DD / YYYY		

Debtor 1 Mary Beth Conve	ry	Case number (if known)			
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Stat for which the person is eligible. I also certify that I have the control of the control	tes Code, and have e ave delivered to the d	xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certify schedules filed with the petition is incorrect.	y that I have no know	ledge after an inquiry that the information in the		
	/s/ Ryan B. Moran Signature of Attorney for Debtor	Date	May 20, 2019 MM / DD / YYYY		

Fill	in this inform	ation to identify your	case:			
Del	otor 1	Mary Beth Conve	ery			
Det	otor 2	First Name	Middle Name	Last Name		
1	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN		
1	se number				- 0	w.a
(IT KI	nown)				_	if this is an ded filing
				_		
Of	ficial For	m 106Sum				
				nd Certain Statistical Information		2/15
info you	rmation. Fill or original form	ut all of your schedul	es first; then complete t	e are filing together, both are equally responsible the information on this form. If you are filing amend the box at the top of this page.		
					Your as	ssets
						f what you own
1.	Schedule A/	B: Property (Official Fo	orm 106A/B)		\$	0.00
					\$	15,210.00
	1c. Copy line	e 63, Total of all propert	y on Schedule A/B		\$	15,210.00
Par		rize Your Liabilities	•		·	
ı aı	CZ.	TILE TOUT LIABINGES			Your lie	abilities
						you owe
2.			laims Secured by Propert mn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	15,780.00
3.			Unsecured Claims (Official 1) (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	1,864.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$	30,140.02
				Your total liabilities	\$	47,784.02
Par	t 3: Summa	arize Your Income and	Expenses			
4.		Your Income (Official Foombined monthly incom	,	e <i>l</i>	\$	2,502.86
5.		Your Expenses (Official onthly expenses from li			\$	2,494.00
Par	t 4: Answer	These Questions for	Administrative and Stat	tistical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. C	? Check this box and submit this form to the court with yo	our other sch	edules.
7.	Yes What kind or	f debt do you have?				
	■ Your de			debts are those "incurred by an individual primarily for	· a personal,	family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,267.89

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,864.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	10,947.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	12,811.00

Fill in this inform	nation to identify your	case and this filing:			
Debtor 1	Mary Beth Conversion	ery Middle Name	Last Name		
Debtor 2	riistivame	Wildale Warrie	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	EASTERN DISTRICT OF	F MICHIGAN		
Case number					☐ Check if this is an
					amended filing
Official For	rm 106A/B				
	e A/B: Prop	perty			12/15
think it fits best. Be	as complete and accura space is needed, attach	ate as possible. If two marrie	once. If an asset fits in more than ed people are filing together, both m. On the top of any additional pa	are equally responsible for	supplying correct
Part 1: Describe E	Each Residence, Building	g, Land, or Other Real Estate	e You Own or Have an Interest In		
1. Do you own or ha	ave any legal or equitabl	le interest in any residence,	building, land, or similar property	?	
■ No. Go to Part	2.				
☐ Yes. Where is	the property?				
Part 2: Describe Y	our Vehicles				
someone else drive	es. If you lease a vehic		hicles, whether they are regis ule G: Executory Contracts and es		vehicles you own that
■ Yes					
3.1 Make: D	Oodge	Who has an inter	rest in the property? Check one		claims or exemptions. Put
	Charger	■ Debtor 1 only			red claims on Schedule D: aims Secured by Property.
Year: 2	014	□ Debtor 2 only		Current value of the	Current value of the
Approximate	mileage: 100	Debtor 1 and 	Debtor 2 only	entire property?	portion you own?
Other inform	ation:	At least one of	the debtors and another		
Condition	sed on NADA n: Good 11387 Fisher, War		is community property	\$10,250.00	\$10,250.00
Examples: Boats ■ No □ Yes 5 Add the dollar	s, trailers, motors, pers	sonal watercraft, fishing ves	nal vehicles, other vehicles, are ssels, snowmobiles, motorcycle ntries from Part 2, including a	accessories	\$10,250.00

Official Form 106A/B Schedule A/B: Property page 1

De	btor 1	Mary Beth C	onvery Cas	e number (if known)
		old goods and f es: Major applian	urnishings ces, furniture, linens, china, kitchenware	
		Describe		
			Various household goods and furnishings Location: 11387 Fisher Ave, Warren MI 48089	\$2,000.00
	□ No	les: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers phones, cameras, media players, games	, scanners; music collections; electronic devices
			Various household electronics Location: 11387 Fisher Ave, Warren MI 48089	\$400.00
	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art ons, memorabilia, collectibles	bjects; stamp, coin, or baseball card collections;
	Example No	ent for sports alles: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and kayaks; carpentry tools;
	□ No ·		s, shotguns, ammunition, and related equipment	
			.38 Taurus Location: 11387 Fisher Ave, Warren MI 48089	\$300.00
	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			Various articles of used clothing Location: 11387 Fisher Ave, Warren MI 48089	\$200.00
	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewel	y, watches, gems, gold, silver
			Various rings, earrings, necklaces, bracelets, watches and miscellaneous jewelry Location: 11387 Fisher Ave, Warren MI 48089	other\$125.00
13.		rm animals oles: Dogs, cats,	birds, horses	

■ No

☐ Yes. Describe.....

Official Form 106A/B Schedule A/B: Property page 2

Del	otor 1	Mary Beth Co	nvery			Case number (if known)	
_	Any o	ther personal and	housel	nold items you di	id not already list, including	any health aids you did not list	
		. Give specific infor	mation.			_	
15.					Part 3, including any entries	s for pages you have attached	\$3,025.00
Par	t 4: De	escribe Your Financia	al Asset	s			
Do	you o	wn or have any leg	gal or e	quitable interest	in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
[□No			•	•	and on hand when you file your petition	١
	Yes.						
						Cash on Debtor's person	\$5.00
[<i>Exam</i> ⊐ No	sits of money ples: Checking, sav institutions. If	vings, o you ha	r other financial ac ve multiple accour	ecounts; certificates of deposit; nts with the same institution, list	shares in credit unions, brokerage host each.	ouses, and other similar
			17.1.	Checking	Michigan First Cr	edit Union	\$425.00
			17.2.	Savings	Michigan First Cr	edit Union	\$5.00
_		s, mutual funds, or aples: Bond funds, ir			brokerage firms, money marke	et accounts	
				Institution or issue	er name:		
19.	Non-p		ck and	interests in incor	porated and unincorporated	businesses, including an interest	in an LLC, partnership, and
		. Give specific infor		about themne of entity:		% of ownership:	
_	Nego	<i>tiable instrument</i> s ir	nclude p	ersonal checks, c	gotiable and non-negotiable ashiers' checks, promissory n transfer to someone by signing	otes, and money orders.	
		. Give specific inforr		about them uer name:			
_		ment or pension a pples: Interests in IR			, 403(b), thrift savings account	s, or other pension or profit-sharing pl	lans
[□ Yes.	. List each account	•	ely. of account:	Institution name:		

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Mary Beth Convery		Case number (if known)	
Your		ave made so that you may continue service or uso prepaid rent, public utilities (electric, gas, water), to		, or others
☐ Yes.		Institution name or individual:		
23. Annui	ties (A contract for a periodic pays	ment of money to you, either for life or for a number	er of years)	
☐ Yes.	Issuer name and o	lescription.		
26 U.S	sts in an education IRA, in an ac .C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program, or under a $\theta(b)(1)$.	qualified state tuition progra	am.
■ No □ Yes.	Institution name ar	nd description. Separately file the records of any ir	nterests.11 U.S.C. § 521(c):	
■ No	s, equitable or future interests in Give specific information about t	property (other than anything listed in line 1),	and rights or powers exerci	sable for your benefit
		e secrets, and other intellectual property sites, proceeds from royalties and licensing agree	ments	
☐ Yes.	Give specific information about t	hem		
Exam	ses, franchises, and other general ples: Building permits, exclusive li	ral intangibles censes, cooperative association holdings, liquor li	censes, professional licenses	
■ No □ Yes.	Give specific information about t	hem		
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re □ No	funds owed to you			
■ Yes	Give specific information about the	nem, including whether you already filed the return	s and the tax years	
		Anticipated 2019 Income Tax Refund Debtor typically owes	Federal	\$1,000.00
		Anticipated 2019 Income Tax Refund Debtor typicall Owes	State	\$500.00
■ No	· • •	ny, spousal support, child support, maintenance, c	livorce settlement, property se	ttlement
	amounts someone owes you ples: Unpaid wages, disability insu benefits; unpaid loans you n	urance payments, disability benefits, sick pay, vaca nade to someone else	ation pay, workers' compensa	tion, Social Security
■ No □ Yes.	Give specific information			
	sts in insurance policies ples: Health, disability, or life insur	rance; health savings account (HSA); credit, home	eowner's, or renter's insurance	
■ No				
⊔ Yes.	Name the insurance company of Company .		ficiary:	Surrender or refund
Official For	m 106A/B	Schedule A/B: Property		page 4

Debtor 1	Mary Beth Convery	Case number (if known)	
			value:
If you some	aterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, cone has died. Give specific information	or are currently entitled to reco	eive property because
Exam ■ No	s against third parties, whether or not you have filed a lawsuit or made a der ples: Accidents, employment disputes, insurance claims, or rights to sue	nand for payment	
	contingent and unliquidated claims of every nature, including counterclaims	s of the debter and rights to	s sot off claims
■ No	Describe each claim	s of the deptor and rights to	set on claims
35. Any fi	nancial assets you did not already list		
■ No □ Yes.	Give specific information		
	the dollar value of all of your entries from Part 4, including any entries for parter 4. Write that number here		\$1,935.00
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In. List any real es	state in Part 1.	
37. Do you	own or have any legal or equitable interest in any business-related property?		
■ No. G	o to Part 6.		
☐ Yes.	Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Inter you own or have an interest in farmland, list it in Part 1.	est In.	
	u own or have any legal or equitable interest in any farm- or commercial fish	ing-related property?	
_	. Go to Part 7. s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above		
Exam	u have other property of any kind you did not already list? ples: Season tickets, country club membership		
■ No			
⊔ Yes.	Give specific information		
54. Add	the dollar value of all of your entries from Part 7. Write that number here		\$0.00

Debtor 1 Case number (if known) **Mary Beth Convery** List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$10,250.00 57. Part 3: Total personal and household items, line 15 \$3,025.00 58. Part 4: Total financial assets, line 36 \$1,935.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$15,210.00 Copy personal property total \$15,210.00 62. 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$15,210.00

Fil	l in this inform	nation to identify your	case:				
De	btor 1	Mary Beth Conve	ry				
Do	btor 2	First Name	Middle Name	Last Name			
1 -	ouse if, filing)	First Name	Middle Name	Last Name			
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN			
Ca	se number						
	nown)						Check if this is an
	<u> </u>]	amended filing
Of	fficial Fo	rm 106C					
			operty You (Claim as Ex	empt		4/19
the	property you lis	sted on <i>Schedule A/B: F</i>	Property (Official Form 10	6A/B) as your source, list	the property that you	claim ás exe	correct information. Using empt. If more space is ages, write your name and
	e number (if kn		, ,	ŭ		·	3 / 3
spe any fun exe	ecific dollar am applicable stade ds—may be un emption to a pa	nount as exempt. Alter atutory limit. Some exe nlimited in dollar amou	exempt, you must spec natively, you may claim emptions—such as thos unt. However, if you clai t and the value of the pr	the full fair market valu se for health aids, rights im an exemption of 100	ue of the property bei s to receive certain bo % of fair market value	ng exempto enefits, and e under a la	ed up to the amount of d tax-exempt retirement aw that limits the
Pa	rt 1: Identify	y the Property You Cla	nim as Exempt				
1.	Which set of	exemptions are you c	laiming? Check one only	v, even if your spouse is f	iling with you.		
	☐ You are cla	aiming state and federal	nonbankruptcy exemptio	ns. 11 U.S.C. § 522(b)(3	3)		
	You are cla	aiming federal exemption	ns. 11 U.S.C. § 522(b)(2	?)			
2.	For any prop	erty you list on Sched	ule A/B that you claim a	s exempt, fill in the info	ormation below.		
		on of the property and line	e on Current value of portion you own		emption you claim	Specific lav	ws that allow exemption

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B			
	Various household goods and furnishings	\$2,000.00	\$2,000.00		11 U.S.C. § 522(d)(3)
	Location: 11387 Fisher Ave, Warren MI 48089 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Various household electronics Location: 11387 Fisher Ave, Warren	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)
	MI 48089 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	.38 Taurus Location: 11387 Fisher Ave, Warren	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)
	MI 48089 Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
	Various articles of used clothing Location: 11387 Fisher Ave, Warren	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)
	MI 48089 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	e Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Various rings, earrings, necklaces, bracelets, watches and other	\$125.00		\$125.00	11 U.S.C. § 522(d)(4)	
	miscellaneous jewelry Location: 11387 Fisher Ave, Warren MI 48089 Line from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit		
	Cash on Debtor's person Line from Schedule A/B: 16.1	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)	
	Line Irom Scriedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit		
	Checking: Michigan First Credit	\$425.00		\$425.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	Savings: Michigan First Credit Union Line from Schedule A/B: 17.2	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)	
	Elle IIIII ochedate AVB. 1112			100% of fair market value, up to any applicable statutory limit		
	Federal: Anticipated 2019 Income Tax Refund	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)	
	Debtor typically owes Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
	State: Anticipated 2019 Income Tax Refund	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)	
	Debtor typicall Owes Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 No	3 years after that for ca	ises fi	·		
	Yes. Did you acquire the property covered No	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	☐ Yes					

Fill in this information	tion to identify you	ır case:			
Debtor 1	Mary Beth Conv	/erv			
Dobtor !	First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankı	ruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN			
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Form	106D				
		Who House Claims Coours	d by Droporty		4044
Schedule D	: Creditors	Who Have Claims Secure	a by Property	<u>y </u>	12/15
		If two married people are filing together, both are e out, number the entries, and attach it to this form. (
1. Do any creditors ha	ive claims secured by	your property?			
□ No. Check th	nis box and submit t	nis form to the court with your other schedules.	You have nothing else to	o report on this form.	
Yes. Fill in al	I of the information	below.			
Part 1: List All S	Secured Claims				
		more than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Credit Acce	ptance Corp	Describe the property that secures the claim:	\$15,780.00	\$10,250.00	\$5,530.00
Creditor's Name		2014 Dodge Charger 100,000 miles			
		Value based on NADA			
		Condition: Good Location: 11387 Fisher, Warren MI			
		48089			
Po Box 513		As of the date you file, the claim is: Check all that apply.			
Southfield,	MI 48037	☐ Contingent			
Number, Street, Ci	ty, State & Zip Code	☐ Unliquidated			
M/h = (h = dah.)	201	Disputed			
Who owes the debt	Check one.	Nature of lien. Check all that apply.	d		
■ Debtor 1 only		An agreement you made (such as mortgage or secar loan)	ecurea		
☐ Debtor 2 only ☐ Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the	•	☐ Judgment lien from a lawsuit			
Check if this claim community debt		Other (including a right to offset)			
	Opened 11/18 Last Active				
Date debt was incurr	ed 2/08/19	Last 4 digits of account number 5687			
Add the dollar value	e of vour entries in C	olumn A on this page. Write that number here:	\$15,78	0.00	
	-	the dollar value totals from all pages.	\$15,78		
Write that number I	nere:	· -	\$13,78	0.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fil	I in this information to identify your c	ase:				
De	btor 1 Mary Beth Conver	•				
Do	First Name	Middle Name Last Nam	е			
	ouse if, filing) First Name	Middle Name Last Nam	е			
Un	ited States Bankruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN				
Ca	se number					
	nown)				_	if this is an led filing
∩f	ficial Form 106E/F					
		ho Have Unsecured Claim	S			12/15
Sch Sch left.	edule G: Executory Contracts and Unexpiredule D: Creditors Who Have Claims Secu	hat could result in a claim. Also list executored Leases (Official Form 1066). Do not inclied by Property. If more space is needed, continuation to report in a Page 1.	ide any cre	editors with partially s t you need, fill it out,	secured claims that a number the entries in	are listed in n the boxes on the
Pa	rt 1: List All of Your PRIORITY Uns	secured Claims				
1.	Do any creditors have priority unsecured	claims against you?				
	☐ No. Go to Part 2.					
	Yes.					
2.	identify what type of claim it is. If a claim has possible, list the claims in alphabetical order	If a creditor has more than one priority unsecus both priority and nonpriority amounts, list that according to the creditor's name. If you have noticular claim, list the other creditors in Part 3.	claim here a	and show both priority a	and nonpriority amoun	ts. As much as
	(For an explanation of each type of claim, se	ee the instructions for this form in the instruction	booklet.)			
			,	Total claim	Priority amount	Nonpriority amount
2.1	Internal Revenue Service	Last 4 digits of account number	4394	\$1,736.00	\$1,736.00	\$0.00
	Priority Creditor's Name Centralized Insolvency	When was the debt incurred?	2018			-
	Operations PO Box 7346				-	
	Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim	is: Check :	all that annly		
	Who incurred the debt? Check one.	Contingent	is. Officer of	ян инас арргу		
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	aim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a communi	ity debt Taxes and certain other debts	ou owe the	government		
	Is the claim subject to offset?	Claims for death or personal in	ury while yo	ou were intoxicated		
	■ No	Other. Specify				
	☐ Yes	Income Ta	xes			

2 State of Michigan	Last 4 digits of account number	4394	\$128.00	\$128.00	\$0.0
Priority Creditor's Name Department of Treasury Collection Division PO Box 77437	When was the debt incurred?	2018			
Detroit, MI 48277-0437					
Number Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply		
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	iim:			
\square At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the g	overnment		
Is the claim subject to offset?	Claims for death or personal in	ury while you	were intoxicated		
No	Other. Specify				
Yes	Income Ta	xes			
 ☐ No. You have nothing to report in this part. Submit ☐ Yes. List all of your nonpriority unsecured claims in the 	this form to the court with your other sealphabetical order of the creditor	who holds ea			
No. You have nothing to report in this part. Submit■ Yes.	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify when the creditor sealphabetical order of the creditor laim.	who holds ea nat type of cla	m it is. Do not list claims	already included in Pa fill out the Continuation	art 1. If more on Page of
 No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. 	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to	who holds ea nat type of cla han three nor	m it is. Do not list claims	already included in Pa	art 1. If more on Page of
 No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. 	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify when the creditor sealphabetical order of the creditor laim.	who holds early type of cla han three nor er 4700	m it is. Do not list claims priority unsecured claims	already included in Pa fill out the Continuation Total cla	art 1. If more on Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Bank Usa N	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to	who holds early type of cla han three nor er 4700	m it is. Do not list claims priority unsecured claims ed 08/18 Last Acti	already included in Pa fill out the Continuation Total cla	art 1. If more on Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Bank Usa N Nonpriority Creditor's Name Po Box 30281	this form to the court with your other set alphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to the creditors in Part 3.If you have m	who holds ea lat type of cla han three nor er 4700 Open: 2/22/1	m it is. Do not list claims priority unsecured claims ed 08/18 Last Acti	already included in Pa fill out the Continuation Total cla	art 1. If more on Page of
□ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Bank Usa N Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130 Number Street City State Zip Code	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to Last 4 digits of account number 1.	who holds ea lat type of cla han three nor er 4700 Open: 2/22/1	m it is. Do not list claims priority unsecured claims ed 08/18 Last Acti	already included in Pa fill out the Continuation Total cla	art 1. If more on Page of im
□ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Bank Usa N Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	this form to the court with your other set alphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to the Last 4 digits of account number of the was the debt incurred? As of the date you file, the claim.	who holds ea lat type of cla han three nor er 4700 Open: 2/22/1	m it is. Do not list claims priority unsecured claims ed 08/18 Last Acti	already included in Pa fill out the Continuation Total cla	art 1. If more on Page of
□ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Bank Usa N Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to Last 4 digits of account numb. When was the debt incurred? As of the date you file, the cla	who holds ea lat type of cla han three nor er 4700 Open: 2/22/1	m it is. Do not list claims priority unsecured claims ed 08/18 Last Acti	already included in Pa fill out the Continuation Total cla	art 1. If more on Page of
□ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Bank Usa N Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only	this form to the court with your other set alphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to be a count number of the creditors in Part 3.If you have more to be a count number of the creditors in Part 3.If you have more to be a count number of the creditors in Part 3.If you have more to be a count number of the creditors in Part 4 digits of account number of the c	who holds ea nat type of cla han three nor er 4700 Open- 2/22/1 im is: Check	m it is. Do not list claims priority unsecured claims ed 08/18 Last Acti	already included in Pa fill out the Continuation Total cla	art 1. If more on Page of
□ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Bank Usa N Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	this form to the court with your other set alphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to be also be also be also be account number. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim continued in the c	who holds ea hat type of cla han three nor er 4700 Open-2/22/1 im is: Check	m it is. Do not list claims priority unsecured claims ed 08/18 Last Acti 9 all that apply	already included in Parifill out the Continuation Total cla	art 1. If more on Page of
□ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Capital One Bank Usa N Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	this form to the court with your other set alphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to be a count number of the creditors in Part 3.If you have more to be a count number of the creditors in Part 3.If you have more to be a count number of the creditors in Part 3.If you have more to be a count number of the creditors in Part 4 digits of account number of the c	who holds ea hat type of cla han three nor er 4700 Open-2/22/1 im is: Check	m it is. Do not list claims priority unsecured claims ed 08/18 Last Acti 9 all that apply	already included in Parifill out the Continuation Total cla	art 1. If more on Page of im
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. Capital One Bank Usa N Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other set alphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to creditors in Part 4.If you have more to creditors in Part 4.If you have more to creditors and the creditors of the creditors and the creditors of the creditors of the creditors and the creditors of th	who holds ea hat type of cla han three nor er 4700 Open-2/22/1 im is: Check ured claim: eparation agr	m it is. Do not list claims priority unsecured claims priority unsecured claims ed 08/18 Last Acti 9 all that apply	already included in Parifill out the Continuation Total cla	art 1. If more on Page of im

	or 1 Mary Beth Convery			
4.2	Cb Indigo/gf	Last 4 digits of account number	7288	\$255.00
	Nonpriority Creditor's Name Po Box 4499 Beaverton, OR 97076	When was the debt incurred?	Opened 07/18 Last Active 1/11/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Cbm Collections	Last 4 digits of account number	8673	\$105.00
,	Nonpriority Creditor's Name	_		
	300 Rodd St Ste 202 Midland, MI 48640	When was the debt incurred?	Opened 10/15 Last Active 9/23/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	□Yes	Other. Specify ConsAbs	Attorney Diagnostic Radiology	
4.4	Check Smart	Last 4 digits of account number	4394	\$676.00
	Nonpriority Creditor's Name 26150 Eureka Rd. Taylor, MI 48180	When was the debt incurred?	2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	agreement of diverse that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Unsecured	Loan	

Comenity Bank/torrid	Last 4 digits of account number	3968	\$251.0
Nonpriority Creditor's Name			Ψ2011
Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 08/18 Last Active 1/11/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Easypay/dvra	Last 4 digits of account number	2957	\$2,382.
Nonpriority Creditor's Name 2701 Loker Av West	When was the debt incurred?	Opened 11/19/18 Last Active 2/28/19	
Carlsbad, CA 92008 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Installment	Sales Contract	
Extra Credit Union	Last 4 digits of account number	0007	\$9,150.
Nonpriority Creditor's Name 6611 Chicago Rd	When was the debt incurred?	Opened 11/18 Last Active 2/28/19	
Warren, MI 48092 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ vos	■ a. a Unsecured		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor	1 Mary Beth Convery		Case number (if known)				
4.8	Extra Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	0004	\$3.00			
	6611 Chicago Rd Warren, MI 48092	When was the debt incurred?	Opened 02/18 Last Active 11/14/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured Student loans					
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin					
	Yes	Other. Specify Unsecured					
4.9	Fed Loan Serv Nonpriority Creditor's Name	Last 4 digits of account number	0004	\$3,715.00			
	Pob 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 10/15 Last Active 2/04/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify					
		Educationa					
4.1 0	Fed Loan Serv Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$3,662.00			
	Pob 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 08/15 Last Active 2/04/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	· · · · · · · · · · · · · · · · · · ·					
		Educations	.1				

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 9

Mary Beth Convery		Case number (if known)	
Fed Loan Serv	Last 4 digits of account number	0003	\$2,442.00
Nonpriority Creditor's Name Pob 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 10/15 Last Active 2/04/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	☐ Other. Specify		
	Educationa	ıl	
Fed Loan Serv	Last 4 digits of account number	0002	\$1,128.00
Nonpriority Creditor's Name Pob 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 08/15 Last Active 2/04/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	l	
First Premier Bank	Last 4 digits of account number	8174	\$466.00
3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	Opened 12/18 Last Active 3/13/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharin		
☐ Yes	Other. Specify Credit Card		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Mary Beth Convery		Case number (if known)	
Frost Arnett Company	Last 4 digits of account number	7609	\$40.00
Nonpriority Creditor's Name PO BOX 1022	When was the debt incurred?	2018	
Wixom, MI 48393 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,	er chook an inat apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□Yes	Other. Specify Collection resource g	account on behalf of medical roup	
Global Trust Management	Last 4 digits of account number	5502	\$676.4
Nonpriority Creditor's Name PO Box 26244 Tampa, FL 33623	When was the debt incurred?	2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection	account on behalf of Check N Go	
C System Inc	Last 4 digits of account number	7858	\$2,295.0
Nonpriority Creditor's Name Po Box 64378 Saint Paul, MN 55164	When was the debt incurred?	Opened 08/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Collection A Other. Specify Michigan P	Attorney American Anesth Of	

Internal Revenue Serivce Nonpriority Creditor's Name PO Box 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Last 4 digits of account number 4394 When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not	\$2,500.00
PO Box 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	
Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community □ Contingent □ Unliquidated □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community □ Student loans	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans	
☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans	
☐ Check if this claim is for a community ☐ Student loans	
Check it this claim is for a community	
debt	
Is the claim subject to offset?	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify Income Taxes	
44	
Planned Parenthood Last 4 digits of account number 9802	\$40.00
Nonpriority Creditor's Name PO Box 3673 When was the debt incurred? 04/2018	
Ann Arbor, MI 48106	
Number Street City State Zip Code As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify Medical Debt	
Syncb/jcp Last 4 digits of account number 5564	\$84.00
Nonpriority Creditor's Name	<u> </u>
Po Box 965007 When was the debt incurred 3 1/05/47	
Orlando, FL 32896 When was the debt incurred? 1/05/17	
Number Street City State Zip Code As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify Charge Account	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Official Form 106 E/F On which entry in Part 1 or Part 2 did you list the original creditor?

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

Debtor 1 Mary Beth Convery		Case number (if known)				
American Anesthesiology of Michigan 1719 W. Big Beaver Road Troy, MI 48084	Line 4.16 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
,,	Last 4 digits of account number					
Name and Address Butler, Butler & Rowse Oberle, PLLC John W. Butler 24525 Harper Ave., Suite 2 Saint Clair Shores, MI 48080	On which entry in Part 1 or Part 2 did the Line 4.7 of (Check one):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
Came Gran Choros, IIII 10000	Last 4 digits of account number					
Name and Address Check N Go 7755 Montgomery Road Suite 400 Cincinnati, OH 45236	On which entry in Part 1 or Part 2 did y Line 4.15 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Diagnostic Radiology Consultants 11800 E 12 Mile Rd. Warren, MI 48093	On which entry in Part 1 or Part 2 did y Line 4.3 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Medical Resources Group DEPT 184101 PO BOX 67000 Detroit, MI 48267-1841	On which entry in Part 1 or Part 2 did y Line 4.14 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1,864.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1,864.00
				7	Total Claim
	6f.	Student loans	6f.	\$	10,947.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	19,193.02
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	30,140.02

Fill in this inform				
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT C	PF MICHIGAN	
Case number _				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Debtor 1	Mary Beth Conve	erv			
_ 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN		
Case nur (if known)	mber				☐ Check if this is an amended filing
	al Form 106H dule H: Your Cod	lebtors			12/15
people ar ill it out, our nam	e filing together, both are equal and number the entries in the e and case number (if known	ually responsible for sup e boxes on the left. Attac). Answer every question	plying correct informath the Additional Page to	ion. If more space is ne o this page. On the top	te as possible. If two married seded, copy the Additional Page, of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
					states and to wite visa in almala
	ithin the last 8 years, have yo ona, California, Idaho, Louisiana				states and territories include
	o. Go to line 3.				
□ Y€	es. Did your spouse, former spo	ouse, or legal equivalent liv	e with you at the time?		
3. In Co in lin Form	olumn 1, list all of your codeb ne 2 again as a codebtor only	tors. Do not include you if that person is a guarar	r spouse as a codebto ntor or cosigner. Make	sure you have listed th	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
3. In Co in lin Form	olumn 1, list all of your codeb ne 2 again as a codebtor only n 106D), Schedule E/F (Officia	itors. Do not include you if that person is a guarar al Form 106E/F), or Sched	r spouse as a codebto ntor or cosigner. Make	sure you have listed th 16G). Use Schedule D, S	e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt
3. In Co in lin Form	blumn 1, list all of your codeb te 2 again as a codebtor only the 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and 2	itors. Do not include you if that person is a guarar al Form 106E/F), or Sched	r spouse as a codebto ntor or cosigner. Make	sure you have listed the logo. Use Schedule D, S	e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3. In Co in lin Form out C	olumn 1, list all of your codeb te 2 again as a codebtor only th 106D), Schedule E/F (Officia Column 2.	itors. Do not include you if that person is a guarar al Form 106E/F), or Sched	r spouse as a codebto ntor or cosigner. Make	Column 2: The cree Check all schedule D, line Schedule D, line Schedule E/F, line	e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt is that apply:
3. In Co in lin Form out C	blumn 1, list all of your codeb te 2 again as a codebtor only the 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and 2	itors. Do not include you if that person is a guarar al Form 106E/F), or Sched	r spouse as a codebto ntor or cosigner. Make	Sure you have listed the DGG. Use Schedule D, SCHEDURG COlumn 2: The cree Check all schedules	e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt is that apply:
3. In Co in lin Form out C	Dlumn 1, list all of your codeb te 2 again as a codebtor only n 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and 2	itors. Do not include your if that person is a guarar al Form 106E/F), or Scheo	r spouse as a codebtoi ntor or cosigner. Make lule G (Official Form 10	Column 2: The cree Check all schedule D, line Schedule D, line Schedule E/F, line Schedule G, line	e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt is that apply:
3. In Co in lin Form out C	Dlumn 1, list all of your codeb te 2 again as a codebtor only n 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and 2	itors. Do not include your if that person is a guarar al Form 106E/F), or Scheo	r spouse as a codebtoi ntor or cosigner. Make lule G (Official Form 10	Column 2: The cree Check all schedule D, line Schedule D, line Schedule E/F, line	e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt is that apply:

Official Form 106H Schedule H: Your Codebtors Page 1 of 1
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						_				
	in this information to identify your btor 1 Mary Beth									
Del	btor 2	Convery								
	ouse, if filing) ited States Bankruptcy Court for th	ne: FASTERN DISTRICT	OF MICHIGAN							
	se number	e. <u>Energrand</u>	01 1110/110			Check	c if this is:			
	nown)		-			☐ Ar	n amende	d filing		
									ving postpetition following date:	
0	fficial Form 106I					M	M / DD/ Y	YYY		
S	chedule I: Your Ind	come								12/15
spo atta	plying correct information. If youse. If you are separated and youch a separate sheet to this form The separate sheet to the separate sheet to the separate sheet to the separate sheet to the separate sheet she	our spouse is not filing ware. On the top of any additi	ith you, do not inclu	de infor	mati	on about	your spo	use. If ı	more space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non	-filing spouse	
	If you have more than one job,	Employment status	■ Employed	■ Employed			☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	Team Leader							
	Include part-time, seasonal, or self-employed work.	Employer's name	Concentrix Serv	vices U	S, Ir	nc.				
	Occupation may include student or homemaker, if it applies.	Employer's address	34115 West Two Farmington Hill							
		How long employed t	here? 7 Years	5			_			
Pa	rt 2: Give Details About M	onthly Income								
	imate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. I	Include your no	n-filing
	ou or your non-filing spouse have r e space, attach a separate sheet t		ombine the informatio	n for all	empl	oyers for t	hat perso	n on the	e lines below. If	you need
						For Deb	tor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	3,	020.29	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$		0.00	+\$_	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	3,02	0.29	\$	N/A	

Case number (if known)

				For	Debtor 1			Debtor 2 -filing sp		
	Сору	y line 4 here	4.	\$	3,020	.29	\$	Tilling 3p	N/A	
	.,			· —	,		· —			-
5.	List a	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	349	.64	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0	.00	\$		N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	0	.00	\$		N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0	.00	\$		N/A	•
	5e.	Insurance	5e.	\$	167	.79	\$		N/A	
	5f.	Domestic support obligations	5f.	\$	0	.00	\$		N/A	_
	5g.	Union dues	5g.	\$	0	.00	\$		N/A	
	5h.	Other deductions. Specify:	5h.+	\$	0	.00	+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	517	.43	\$		N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,502	.86	\$		N/A	_
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0	.00	\$		N/A	
	8b.	Interest and dividends	8b.	<u> </u>		.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$.00	\$		N/A	-
	8d.	Unemployment compensation	8d.	\$.00	\$		N/A	
	8e.	Social Security	8e.	\$.00	\$		N/A	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$.00	\$ \$		N/A N/A	-
	8h.	Other monthly income. Specify:	8h.+	· —		.00	· —		N/A	-
	OH.	Other monthly moonie. Specify.	_ 011.7	Ψ		.00	ΤΨ		IN/A	- -
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0	.00	\$		N/A	<u> </u>
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$	2	2,502.86	+ \$		N/A =	\$	2,502.86
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-			-	
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. of include any amounts already included in lines 2-10 or amounts that are not sifty:	depen	-	•			chedule .		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						12.	\$	2,502.86
									ombii	
13.	Do y	ou expect an increase or decrease within the year after you file this form	?					n	nonthl	y income
		No.								

Fill	in this informa	ation to identify ye	our case:			I		
	tor 1	Mary Beth C				Chec	k if this is:	
		, 20					An amended filing	
	tor 2 ouse, if filing)						A supplement shown 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bank	ruptcy Court for the	EASTE	RN DISTRICT OF MICHIG	SAN	-	MM / DD / YYYY	
	e number nown)							
		orm 106J						
		J: Your						12/15
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par	t 1: Desc	ribe Your House	ehold					
1.	No. Go to							
		es Debtor 2 live	in a separ	ate household?				
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.	
2.	Do you hav	re dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	Do your ex	penses include	_	No				□ 163
		of people other to d your depende	han $_{\square}$	Yes				
Par		nate Your Ongoi			anaaina thia f		unlawantin a Cha	
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
(Off	ficial Form 10	061.)					Your exp	enses
4.		or home owners nd any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4. \$		750.00
	If not include	ded in line 4:						
		estate taxes				4a. \$		0.00
		erty, homeowner's				4b. \$		0.00
		e maintenance, re eowner's associa		upkeep expenses		4c. \$ 4d. \$	-	0.00 0.00
5.				our residence, such as ho	me equity loans	4u. 5 5. \$		0.00
		5 5 1 5 5 1	. ,	,	,	- +		

Official Form 106J

	mary Dom Convery			
6.	Utilities:			
٥.	6a. Electricity, heat, natural gas	6a.	\$	250.00
	6b. Water, sewer, garbage collection	6b.	\$	30.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		100.00
	6d. Other. Specify:	6d.	_	0.00
7.	Food and housekeeping supplies		\$	300.00
8.	Childcare and children's education costs	8.		0.00
9.	Clothing, laundry, and dry cleaning	9.		75.00
	Personal care products and services	10.	· —	60.00
11.		11.		50.00
	Transportation. Include gas, maintenance, bus or train fare.		• —	30.00
	Do not include car payments.	12.	\$	150.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	Charitable contributions and religious donations	14.	\$	0.00
	Insurance.		· —	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	300.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		_	
	Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	429.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as			
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Scheo			
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify:	21.	+\$	0.00
00	O-1			
22.	Calculate your monthly expenses		•	0.404.00
	22a. Add lines 4 through 21.		\$_	2,494.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$_	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$_	2,494.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,502.86
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,494.00
				·
	23c. Subtract your monthly expenses from your monthly income.		<u>_</u>	9.96
	The result is your monthly net income.	23c.	\$	8.86

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.

☐ Yes.

Explain here: Line 15c lists Debtor's anticipated vehicle insurance payment once her credit is cleared. Debtor currently is paying \$800.00 per month for car insurance.

Official Form 106J Schedule J: Your Expenses
19-47629-mlo Doc 1 Filed 05/20/19 Entered 05/20/19 15:36:13 Page 33 of 51

Fill in this infor	mation to identify you	r case:		
Debtor 1	Mary Beth Conv	erv		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number if known)				☐ Check if this is an amended filing
Official Ford		an Individual	Debtor's Sc	chedules 12/15
	n Below	eone who is NOT an attor	nev to help you fill out h	bankruptcv forms?
■ No	.,g p,		,	
■ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Un den men.	alty of perjury, I declare	e that I have read the sum	mary and schedules file	ed with this declaration and
•	e true and correct.		,	
that they ar	re true and correct.		х	
that they ar X /s/ Mary E			•	Debtor 2
that they ar X /s/ Mai Mary E Signatu	ry Beth Convery Beth Convery		x	Debtor 2

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Cill	in this inform	nation to identify you	r ease.							
Det	otor 1	Mary Beth Conv	ery Middle Name	Last Name						
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name						
Uni	ted States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN						
	se number				_	Check if this is an				
Sta Be a info	s complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup y additional pages, write you					
Par			rital Status and Where You	Lived Before						
1.	What is your	r current marital statu	ıs?							
	■ Married■ Not mar	ried								
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?						
	■ No □ Yes. Lis	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. state					ity property state or territor co, Texas, Washington and V					
	■ No □ Yes. Ma	ike sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	fficial Form 106H).						
Par	t 2 Explai	n the Sources of You	r Income							
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
	□ No ■ Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,962.99	☐ Wages, commissions, bonuses, tips					
			□ Operating a business		☐ Operating a business					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

De	btor 1	Ma	ry Beth C	h Convery C			Case number (if known)			
			-	-						
					Debtor 1	Debtor 2				
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)	
/ lanuary 1 to December 31 2018)			31, 2018)	■ Wages, commissions, bonuses, tips	\$37,135.00					
					☐ Operating a business		Operating a l	ousiness		
For the calendar year before that: (January 1 to December 31, 2017)					■ Wages, commissions, bonuses, tips	\$35,794.00	☐ Wages, commissions, bonuses, tips			
					☐ Operating a business		☐ Operating a l	ousiness		
	and other public benefit payments; pens winnings. If you are filing a joint case are List each source and the gross income No Yes. Fill in the details.			ing a joint cas	se and you have income that y	ou received together, list it o	only once under De	btor 1.	a gambing and lottery	
					Dobtor 4		Dobtor 2			
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)	
Pa	rt 3:	List	Certain Pa	vments You	Made Before You Filed for B	,				
6.		No.	Neither Deindividual During the No. Yes * Subject	90 days before Go to line 7 List below expaid that crunot include to adjustment or Debtor 2 or 90 days before Go to line 7 List below expaid that crunot include to adjustment or Debtor 2 or 90 days before Go to line 7 List below expanding the pay	each creditor to whom you paid editor. Do not include paymen payments to an attorney for the t on 4/01/22 and every 3 years or both have primarily consulate one you filed for bankruptcy, did	mer debts. Consumer debted purpose." If you pay any creditor a total da total of \$6,825* or more ts for domestic support obliquis bankruptcy case. If after that for cases filed on mer debts. If you pay any creditor a total da total of \$600 or more and	al of \$6,825* or more pay gations, such as che or after the date of al of \$600 or more?	e? ments and ti ild support a f adjustment	he total amount you ind alimony. Also, do t creditor. Do not	
	Cre	ditor'	s Name and	•	Dates of payme	nt Total amount	Amount you	Was this r	payment for	
	3.0		uii		zatos er paymen	paid	still owe		,	

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	rships of which securities; and	you are a genera any managing a	al partner; corporations agent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		ments or transfer a	ny property on	account of a d	ebt that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment ditor's name
Pai	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.					
	No. Go to line 11.☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Dat	te	Value of the property
		Explain what happened				
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No					
	☐ Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Dat tak	te action was en	Amount
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?					
	■ No					
	Yes					
	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	with a total value	of more than \$	600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts			tes you gave gifts	Value
	Person to Whom You Gave the Gift and Address:					

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1 Mary Beth Convery

Deb	otor 1 Mary Beth Convery		Case	number (if known)	
14.	Within 2 years before you filed for bankru ■ No	ptcy, did you give any gif	ts or contributions wi	th a total value of more than	\$600 to any charity?
	\square Yes. Fill in the details for each gift or co	ntribution.			
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		u contributed	Dates you contributed	Value
Part	t 6: List Certain Losses				
	Within 1 year before you filed for bankrup or gambling?	tcy or since you filed for	bankruptcy, did you lo	ose anything because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	how the loss occurred	Describe any insurance conclude the amount that insinsurance claims on line 33	urance has paid. List pe		Value of property lost
Part	t 7: List Certain Payments or Transfers				
	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pr	reparing a bankruptcy pe	tition?		rty to anyone you
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	transferred	alue of any property	Date payment or transfer was made	Amount of payment
	Moran Law 25600 Woodward Ave Suite 201 Royal Oak, MI 48067 ecf@moranlawoffice.com	Pre-petition Ch	apter 7 Attorney's F	Fees 05/20/2019	\$300.00
	www.debtorcc.org	Pre-filing Credi	t Counseling Cours	e 05/15/2019	\$14.95
	www.debtorcc.org				
Gifts more Chan Add Part 6: 15. Within or gar Deschow Part 7: 16. Within consum linclude man Pers More 2566 Suiff Roy ecf 6 www. Www. Www. 17. Within prome Do not and add add add add add add add add add	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that you ho	itors or to make payments		alf pay or transfer any prope	rty to anyone who
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address	Description and variansferred	alue of any property	Date payment or transfer was made	Amount of payment
Par 15. Par 16.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alre No Yes. Fill in the details.	business or financial affa made as security (such as	airs? the granting of a securit		
	Person Who Received Transfer	Description and	value of D	escribe any property or	Date transfer was
	Address	property transfer	red pa	ayments received or debts aid in exchange	made
	Person's relationship to you				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Del	btor 1 Mary Beth Convery			Case nun	nber (if known)	
	Person Who Received Transfer Address	Description an property trans		paym	ribe any property or ents received or debts in exchange	Date transfer was made
	Person's relationship to you Best of Michigan Auto Sales LLC 16850 East 8 Mile Road, Detroit, MI 48205	2002 Jeep Lil \$2,000.00	berty	\$2,00 in	00.00 towards trade	11/2018
	Det. Oit, 1811 40203					
19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p		any property to a	self-settle	ed trust or similar device	of which you are a
	☐ Yes. Fill in the details.					
	Name of trust	Description an	d value of the prop	erty trans	sferred	Date Transfer was made
Pai	rt 8: List of Certain Financial Accounts, I	nstruments. Safe Den	osit Boxes, and Sto	orage Uni	ts	
	<u> </u>	•	•			
20.	Within 1 year before you filed for bankrups sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, ass No Yes. Fill in the details.	, or other financial acc	ounts; certificates	of depos		
	Name of Financial Institution and	Last 4 digits of	Type of accou	nt or	Date account was	Last balance
	Address (Number, Street, City, State and ZIP Code)	account number	instrument		closed, sold, moved, or transferred	before closing or transfer
	Extra Credit Union 6611 Chicago Road Warren, MI 48092	xxxx-xxxx	■ Checking □ Savings □ Money Mark □ Brokerage □ Other	ĸet	Balance in the negative at time of closing 12/2018	\$0.00
	Extra Credit Union 6611 Chicago Road Warren, MI 48092	XXXX-xxxx	☐ Checking ■ Savings □ Money Mark □ Brokerage	ket	12/2018	\$5.00
			☐ Other			
21.	Do you now have, or did you have within cash, or other valuables? No Yes. Fill in the details.	1 year before you filed	for bankruptcy, an	y safe de	posit box or other depos	sitory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Number State and ZIP Code	er, Street, City,	Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit			year befo	re you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has of to it? Address (Number State and ZIP Code	er, Street, City,	Describe	the contents	Do you still have it?
		,				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Debtor 1 Mary Beth Convery Case number (if known)

Pai	t 9: Identify Property You Hold or Control for S	omeone Else				
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	■ No					
	Yes. Fill in the details.	14 11	5			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Par	t 10: Give Details About Environmental Information	tion				
For	the purpose of Part 10, the following definitions a	ipply:				
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous o toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.					
	Site means any location, facility, or property as c to own, operate, or utilize it, including disposal s	-	law, whether you now own, operate,	or utilize it or used		
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si		s waste, hazardous substance, toxic s	substance,		
Rep	ort all notices, releases, and proceedings that you	u know about, regardless of whe	n they occurred.			
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any r	release of hazardous material?				
	No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or administ	trative proceeding under any env	ironmental law? Include settlements a	and orders.		
	No					
	Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Pai	t 11: Give Details About Your Business or Conn	nections to Any Business				
27.	Nithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?					
	☐ A sole proprietor or self-employed in a tr	ade, profession, or other activity	either full-time or part-time			
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Deb	otor 1 Mary Beth Convery	Ca	ase number (if known)
	■ No. None of the above applies. Go to	Part 12.	
Parti I havare to with 18 U. /s/ I Mar Sigr	Yes. Check all that apply above and fi	Il in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	otcy, did you give a financial statement to a	nyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	Address (Number, Street, City, State and ZIP Code) art 12: Sign Below		
are t with 18 U	rue and correct. I understand that making a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property, or c	declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both.
Ma	Mary Beth Convery ry Beth Convery nature of Debtor 1	Signature of Debtor 2	
Dat	May 20, 2019	Date	
	·	ent of Financial Affairs for Individuals Filin	ng for Bankruptcy (Official Form 107)?
■ N	you pay or agree to pay someone who is no o es. Name of Person Attach the <i>Bankr</i> o		•

United States Bankruptcy Court Eastern District of Michigan

In re	Mary Beth Convery	Case No.
	Debtor(s)	Chapter 7
	STATEMENT OF ATTORNEY FOR T PURSUANT TO F.R.BANKR.P. 2	
	The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:	
1.	The undersigned is the attorney for the Debtor(s) in this case.	
2.	The compensation paid or agreed to be paid by the Debtor(s) to the undersigned	d is: [Check one]
	[X] FLAT FEE	
	A. For legal services rendered in contemplation of and in connection w	
	exclusive of the filing fee paid for services	Post-Petition: 665.00
		Total: 995.00
	B. Prior to filing this statement, received	
	C. The unpaid balance due and payable is	665.00
	[] <u>RETAINER</u>	
	A. Amount of retainer received	
	B. The undersigned shall bill against the retainer at an hourly rate of \$_ agreed to pay all Court approved fees and expenses exceeding the ar	
3.	\$ of the filing fee has been paid.	
4.	In return for the above-disclosed fee, I have agreed to render legal service for a that do not apply.]	ll aspects of the bankruptcy case, including: [Cross out any
	A. Analysis of the debtor's financial situation, and rendering advice to the bankruptcy;	ne debtor in determining whether to file a petition in
	B. Preparation and filing of any petition, schedules, statement of affairs	
	 C. Representation of the debtor at the meeting of creditors and confirma D. Representation of the debtor in adversary proceedings and other cont 	
	E. Reaffirmations;	,
	F. Redemptions; G. Other:	
	All fees governed by Fee Agreement.	
5.	By agreement with the debtor(s), the above-disclosed fee does not include the find ADVERSARY PROCEEDINGS, MISC. MOTIO	
6.	The source of payments to the undersigned was from:	
	A. Debtor(s)' earnings, wages, compensation for servi B. Other (describe, including the identity of payor)	ces performed
7.	The undersigned has not shared or agreed to share, with any other person, other corporation, any compensation paid or to be paid except as follows:	r than with members of the undersigned's law firm or
Dated:	May 20, 2019	/s/ Ryan B. Moran
		Attorney for the Debtor(s) Ryan B. Moran P70753 Moran Law 25600 Woodward Ave Suite 201 Royal Oak, MI 48067 (248) 246-6536 ecf@moranlawoffice.com
Agreed:	/s/ Mary Beth Convery	
-	Mary Beth Convery	D.L.
	Debtor	Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Cł	napter 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u> _	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

Best Case Bankruptcy

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	Mary Beth Convery		Case No.	
		Debtor(s)	Chapter 7	
Γhe abov	VER	FICATION OF CREDITOR	MATRIX	
Γhe ab	ove-named Debtor hereby verifies t	that the attached list of creditors is true and	correct to the best of his/her knowledge	e.
Date:	May 20, 2019	/s/ Mary Beth Convery		
		Mary Beth Convery		_
		Signature of Debtor		

Experian (Notice) PO Box 9554 Allen, TX 75013

Equifax (Notice) PO Box 740256 Atlanta, GA 30374

TransUnion (Notice)
Po Box 2000
Chester, PA 19022

TeleCheck Services, Inc. (Notice) 5251 Westheimer Houston, TX 77056

Chex Systems, Inc. (NOTICE) Attn: Consumer Relations 7805 Hudson Road Suite 100 Woodbury, MN 55125

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Michigan Department of Treasury PO Box 30199 Lansing, MI 48909-7699

Unemployment Insurance Agency (NOTICE) Benefit Overpayment Collection Unit PO Box 9045 Detroit, MI 48202

Michigan Office of Child Support -NOTICE Central Functions Unit PO Box 30478 Lansing, MI 48909

United States Attorneys Office Attn: Civil Division 211 W. Fort Street, Suite 2001 Detroit, MI 48226 American Anesthesiology of Michigan 1719 W. Big Beaver Road Troy, MI 48084

Butler, Butler & Rowse Oberle, PLLC John W. Butler 24525 Harper Ave., Suite 2 Saint Clair Shores, MI 48080

Capital One Bank Usa N Po Box 30281 Salt Lake City, UT 84130

Cb Indigo/gf Po Box 4499 Beaverton, OR 97076

Cbm Collections 300 Rodd St Ste 202 Midland, MI 48640

Check N Go 7755 Montgomery Road Suite 400 Cincinnati, OH 45236

Check Smart 26150 Eureka Rd. Taylor, MI 48180

Comenity Bank/torrid Po Box 182789 Columbus, OH 43218

Credit Acceptance Corp Po Box 513 Southfield, MI 48037

Diagnostic Radiology Consultants 11800 E 12 Mile Rd. Warren, MI 48093

Easypay/dvra 2701 Loker Av West Carlsbad, CA 92008 Extra Credit Union 6611 Chicago Rd Warren, MI 48092

Fed Loan Serv Pob 60610 Harrisburg, PA 17106

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

Frost Arnett Company PO BOX 1022 Wixom, MI 48393

Global Trust Management PO Box 26244 Tampa, FL 33623

I C System Inc Po Box 64378 Saint Paul, MN 55164

Internal Revenue Serivce PO Box 7346 Philadelphia, PA 19101

Medical Resources Group DEPT 184101 PO BOX 67000 Detroit, MI 48267-1841

Planned Parenthood PO Box 3673 Ann Arbor, MI 48106

State of Michigan Department of Treasury Collection Division PO Box 77437 Detroit, MI 48277-0437 Syncb/jcp Po Box 965007 Orlando, FL 32896